| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  |                              |                                     |            |                        |            |   |                        |       |
|---|------------------------------|-------------------------------------|------------|------------------------|------------|---|------------------------|-------|
| CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE OR SMALL ENTITY                                     |                              |                                     |            |                        |            |   |                        |       |
| TOTAL CLAIMS /7   |                              |                                     | RATE       | FEE                    |            | RATE                                    | FEE                    |       |
| FOR .   | NUMBER FILED                 | HUMBER EXTRA                        | BASIC FEE  | 355.00                 | OR         | BASIC FEE                               | ·710.00                |       |
| TOTAL CHARGEABLE CLAIMS   | 34 minus 20=                 | - 14                                | X3 9=      |                        | OR.        | ·X\$18=                                 | 252                    |       |
| INDEPENDENT CLAIMS  | 2 minus 3 = '                |                                     | X40=       |                        |            | XBO                                     | 000                    |       |
| MULTIPLE DEPENDENT CLAIM PRESENT  |                              |                                     |            |                        | OR         |   | 00                     |       |
| "If the difference in column 1 is less than zero, enter "O" in column 2   |                              |                                     | +135=      |                        | OR         | +270=                                   | 340                    |       |
|   | TOTAL                        | L                                   | OR         | TOTAL                  | 962        |   |                        |       |
| 9/30/05 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |                              |                                     |            | ENTITY                 | OR         | SMALL                                   |                        |       |
| CLAIMS REMAINING AFTER AMENDMENT Total July Independent 2   | HKGF<br>NUM<br>PREVI<br>PAID | BER PRESENT<br>OUSLY EXTRA          | RATE       | ADDI-<br>TIONAL<br>FEE |            | RATE                                    | ADDI-<br>TIONAL<br>FEE |       |
| Total · 34  | Minus                        | 34 -0                               | X\$ 9=     | 1                      | OR         | X\$18=                                  |                        |       |
| Independent - 2   | Minus                        | 30                                  | X40=       |                        | OR         | X80=                                    |                        |       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /  |                              |                                     | -400       | /-                     |            | . 672                                   | -                      | مد    |
| 1.1.  | •                            | ٠.                                  | +135a      |                        | OR         | +270=<br>YOYAL                          | -/                     | 9EST  |
| (Column 2) (Column 3)   |                              |                                     | ADDIT FEE  |                        | OR         | ADDIT. FEE                              |                        | _     |
| (Column 1) CLAIMS   | Hide                         |                                     |            | ADDI-                  | 1 1        |   | ADD1-                  |       |
| REMAINING AFTER AMENDMENT   |                              | OUSLY EXTRA                         | RATE       | TIONAL<br>FEE          |            | RATE .                                  | TIONAL<br>FEE          | AVAIL |
| REMAINING AFTER AMENDMENT Total Independent   | Minus                        | =                                   | ×5.9=      | 755                    | OR         | X\$18=                                  |                        | X     |
| Independent ·   | Minus 4 mm                   |                                     | X40=       |                        |            | X89=                                    |                        | ABLE  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                              |                                     |            |                        | OR         |   |                        | 0     |
| 1:1   |                              |                                     | +135-      |                        | <b>9</b> 8 | +270=                                   |                        | COPY  |
| 22/3/1/2  |                              |                                     | ADOIT. FEE |                        | OR.        | ADDIT. FEE                              | N                      | 7     |
| (Column 1)  | (Colu                        |                                     | 1          | ζ ,                    |            | *************************************** |                        |       |
| REMAINING . AFTER AMERICAENT  | PREVI<br>PREVI<br>-PAID      | BER PRESENT<br>OUSLY EXTRA -<br>FOR | PATE       | ADDI-<br>TIONAL<br>FEE |            | RATE                                    | ADDI:<br>TIONAL<br>FEE |       |
| AFTER AMENDMENT  Total  Independent  Independent  | Mary 9                       | m • n                               | X\$ 9-     | ·                      | OR.        | X\$18=                                  | .)                     |       |
| Independent   | 1 of                         |                                     | X40-       | 1.                     | OR         | X080=                                   |                        |       |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                              |                                     |            | ,                      |            | +270-                                   | ,                      |       |
| " If the entry in column 1 is less than the entry in column 2, write 'V' in column 3.   |                              |                                     |            |                        | OR         | 7 TOTAL                                 |                        |       |
| If the Proposition Previously Pald For IN THES SPACE is less than 30, erain "30."  ACOUT, FEE                                   |                              |                                     |            |                        |            |   |                        | 1     |
| The "Righest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                              |                                     |            |                        |            |   |                        |       |